



Iranian Bushwalkers Inc.

Org. No: A0061639S
Email: info@ib.org.au
Web: www.ib.org.au

Application for Membership

Personal Details

1 st Adult	Mr Mrs Miss Ms	Mr Mrs Miss Ms
	First Name:	First Name:
	Last Name:	Last Name:
	Contact Details	Contact Details
	Mobile:	Mobile:
	Email:	Email:
	Address:	
	No Street Suburb State Post Code	

List dependent children under 18 who are living at the address below whom you wish to include in your family membership. In addition to listing children in the box below it is essential that the parent/guardian sign the Risk Waiver Form for each child and return it with this form to the club before the child attends its first club activity.

1 st Child:	Age	2 nd Child:	Age
3 rd Child:	Age		

I declare that:

- a) I wish to become a member of the **Iranian Bushwalkers Inc.** (Association); and
- b) I support the purposes of the Association; and
- c) I agree to comply with the Association Rules.

ACKNOWLEDGEMENT OF RISKS AND OBLIGATIONS OF MEMBERS

This acknowledgement of risks applies to all club activities I may undertake as a member of **Iranian Bushwalkers Inc.** In voluntarily participating in activities of the Club which are described to me by the activity leaders I am aware that my participation in the activities may expose me to hazards and risks that could lead to injury, illness or death or to loss of or damage to my property. I also acknowledge that I may encounter weather conditions that could lead to hypothermia and being in locations where evacuation for medical treatment may take hours or days.

In particular when participating in abseiling or above the snowline activities I am aware that these activities could expose me to additional hazards and risks described to me by the activity leader.

To minimise risks I will endeavour to ensure that:

1. Each activity is within my capabilities,
2. I am carrying food, water and equipment appropriate for the activity,
3. I will advise the activity leader if I am taking any medication or have any physical or other limitation that might affect my participation in the activity,
4. I will make every effort to remain with the rest of the party during the activity,
5. I will advise the leader of any concerns I am having, and
6. I will comply with all reasonable instructions of club officers and the activity leader.

I have read and understand the above requirements. I have considered the risks before choosing to sign this acknowledgement of risk. I still wish to join the activities of the Club. I acknowledge that I will take responsibility for my own actions and that signing this form and the payment of my subscription will be deemed as full acceptance and understanding of the above conditions.

Signature (1st Adult): _____ Date: _____
Signature (2nd Adult): _____ Date: _____

Please enclose with this application form your cash or payment receipt for **\$50/Adult** annual membership fee.
Return completed form(s) and fee to one of the Committee members.

Account Details

Bank Name: Westpac Banking Corporation
BSB: 033-380
Account No.: 515938
Account Name: Iranian Bushwalkers